

*10/2*  
**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

*10/15/63/03*

CLAIMS

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	/				
2	/					
3	/					
4	/					
5	/					
6	/					
7	/					
8	/					
9	/					
10	/					
11	/					
12	/					
13	/					
14	/					
15	/					
16	/					
17	/					
18	/	/				
19	/					
20	/					
21	/					
22	/					
23	/					
24	/					
25	/					
26	/					
27	/					
28	/					
29	/					
30	/					
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
	51	/				
52	/					
53	/					
54	/					
55	/					
56	/					
57	/					
58	/					
59	/					
60	/					
61	/					
62	/					
63	/					
64	/					
65	/					
66	/					
67	/					
68	/					
69	/					
70	/					
71	/					
72	/					
73	/					
74	/					
75	/					
76	/					
77	/					
78	/					
79	/					
80	/					
81	/					
82	/					
83	/					
84	/					
85	/					
86	/					
87	/					
88	/					
89	/					
90	/					
91	/					
92	/					
93	/					
94	/					
95	/					
96	/					
97	/					
98	/					
99	/					
100	/					
TOTAL IND.	3					
TOTAL DEP.	27					
TOTAL CLAIMS	30					

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MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

10/563703

## CLAIMS

CLAIMS	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
	101						151				
102							152				
103							153				
104							154				
105							155				
106							156				
107							157				
108							158				
109							159				
110							160				
111							161				
112							162				
113							163				
114							164				
115							165				
116							166				
117							167				
118							168				
119							169				
120							170				
121							171				
122							172				
123							173				
124							174				
125							175				
126	/						176				
127	/						177				
128	/						178				
129	/						179				
130	/						180				
131							181				
132							182				
133							183				
134							184				
135							185				
136							186				
137							187				
138							188				
139							189				
140							190				
141							191				
142							192				
143							193				
144							194				
145							195				
146							196				
147							197				
148							198				
149							199				
150							200				
TOTAL IND.	2		↓		↓		TOTAL IND.		↓		
TOTAL DEP.	3		←		←		TOTAL DEP.		↓		
TOTAL CLAIMS	5		████████		████████		TOTAL CLAIMS		████████		